## New Jersey Department Of Education Office of Vocational – Technical , Career and Adult Programs Carl D. Perkins Vocational and Technical Education Act of 1998 and/or State Vocational Education

## FISCAL YEAR 2004 BUDGET DETAIL FORM A

A. (check	k one)	_ Seconda	ary Postsecondary				
B. ELIGIE	BLE RECIPIE	ENT:	C. PERKINS PR	C. PERKINS PROJECT NUMBER: 04			
D. EXPE	NDITURE CA	TEGORY:_	E. FUNCTION 8	E. FUNCTION & OBJECT CODE #:			
		(Note: Us	e a SEPARATE PAGE, or set of pages for EACH Expen	diture Cate	gory)		
F.	G.	H.	I. DESCRIPTION/ITEMIZATION/JUSTIFICATION	J.	K.	L.	
*GOAL and OBJECTIVE NUMBER (from multi- year Plan)	STANDARD AND MEASURE ADDRESSED (from multi- year plan)	CIP CODE(S) (Approved Programs Only)	Include name of item, description of item and the rationale for purchasing this item. For all equipment and non-consumable supplies, include minimum specifications, as required by Section 6.4.1.7 of the guidelines.	HOW MANY?	COST PER UNIT	TOTAL COST (J x K = L)	
					N. Total		
			M. Page of				

Revision? Y/N

O. Date:

## INSTRUCTIONS FOR COMPLETING BUDGET DETAIL FORM A

Use as many Budget Detail forms as needed. Use separate Budget Detail forms for each change of Expenditure Category. <u>Do not mix expenditure categories</u> on the same Budget Detail form. Do <u>not</u> list Salaries or Fringe Benefits on this form. Use the forms specific for salaries and fringe benefits.

Review allowable and non-allowable costs and definitions in the guidelines before completing these pages. List only those budget items consistent with the approved plan and those consistent with the budgetary constraints listed in the guidelines.

Items A through E are in the Header: Check Secondary or Postsecondary. Enter: Eligible Recipient name, Perkins Project Number, Expenditure Category, and Function and Object Code on the appropriate lines.

Complete each column as described below for those requested costs to be fully or partially paid from Perkins federal and/or State Vocational Education funds:

Column F: GOAL, AND OBJECTIVE NUMBER: List the number of the goal and objective (from the approved Multi-year Plan) being addressed.

Column G: Include the code for the Standard and Measure being addressed by each specific expenditure. Use the following codes:

Academic Proficiency - AP Evidence of Completion - C

Vocational-Technical Skill Proficiencies - VT Placement Achievement – P Nontraditional Training - NT

Column H: CIP Code - Enter the CIP Code of the <u>approved</u> occupational program for which the expenditure is intended. Secondary school grantees may view the Department of Education web site for the list of the grantee's verified occupational education programs at <a href="http://www.state.nj.us/njded/voc/pubvoc.htm">http://www.state.nj.us/njded/voc/pubvoc.htm</a>

**Column I: DESCRIPTION/ITEMIZATION/JUSTIFICATION:** List/describe the item(s) proposed for funding in each category. Include information and/or specifications sufficient to describe and justify the proposed item or service. List Salaries on Budget Detail Form C and Fringe Benefits on Budget Detail Form B. **If space is needed on the Budget Detail form for additional items, insert additional rows.** 

## ITEMIZED BUDGET INFORMATION:

- 1. Salaries: DO NOT LIST SALARIES OR BENEFITS ON FORM A.
- 2. <u>Purchased Services</u> (100-300,100-500; 200-320 & 200-500): Specify the costs for services including the rate of payment (i.e., hourly, daily, per item, per pupil); the amount of service to be provided (i.e., number of pupils, evaluation, hours); and the total cost budgeted from program funds.
- 3. <u>Instructional Supplies</u> (100-600): List the total being requested, but include a description of how the funds will be used. See guidelines for consumable and non-consumable supplies.
- 4. <u>Textbooks</u> (100-600): Provide per item cost and total cost of each title.
- 5. Non-Instructional Supplies and Materials (200-600): Show administrative and program costs.
- 6. <u>Equipment</u> (400-731 & 732): Describe and specify the cost for <u>each</u> piece of equipment (unit cost of \$2000 or more), separating instructional and non-instructional equipment. Place equipment item total costs in the total requested column. **Budget whole dollars only**.
- 7. List costs for all other areas similarly to those described above.

Column J: List the quantity of the item desired. Column K: List the per-unit cost of the item.

Column L: List the total cost of each item (Column J x Column K = Column L).

Item M: Enter the page number(s).

Item N: Enter the total of column L at the bottom of the form.

Item O: On the "Revision?" line enter "no" if this is the original submission of the plan. Enter "yes" if this is a revision to the latest approved

plan.